10718531

									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									i) 118531					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTIT			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			.24				ŀ	RATE	E	FEE	7	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC F	ĒΕ	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			24 mi	nus 20=	.4	4/1		X\$ 9			OR	X\$18=	72	
INDEPENDENT CLAIMS			/ m	inus 3 =				X43=			OR	X86≈	19	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT	-					_		1	+290=		
• 11	the difference	in column 1 is	less than z	ess than zero, enter "0" in column 2				TOTAL			OR	L	8113	
CLAIMS AS AMENDED - PART II								IOIA	- 1		OR	TOTAL	84a	
(Column 1) (Column 2) (Column 3)							•	SMAL	LE	NTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		MIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 24	Minus	- 4	14	• —		X\$ 9=			OR	X\$18=	1	
	Independent	• )	Minus	***	3	•	X43:		1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1			+290=		
								TOT/			OR	TOTAL		
-	7/3/6 (Column 1) (Column 2) (Column 3)							DDIT. FE			OR,	ADDIT. FEE		
	CLAIMS HIGHEST						[		7	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE		TIONAL		RATE	TIONAL	
	Total	. 27	Minus	- 2	4	- 3		X\$ 9=			OR	X\$18=	150	
	Independent	NTATION OF MIL	Minus	SAIDENT.	<u> </u>	-		X43=	1		OR	X86=		
	PINOT PRESE	ITATION OF MIC	LIFLE DEF	ENDENT.	COVIN			+145=	T		OR	+290=		
								TOTA			OR ,	TOTAL ADDIT, FEE	150	
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	er USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
3	Total	•	Minus	90		• .	ſ	X\$ 9=	T		OR	X\$18=		
ME	Independent	•	Minus	***	000		F	X43=	†			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM.		ŀ		╁		OR			
. #	* If the entry in column 1 is less than the nary in column 2, write 'U' in column 3.										OR	+290=		
(1	the "Highest Nur	nber Previously Pal moer Previously Pa	df FIN THE	SPACE B	less thei	20, enter "20."	AE	TOTAL ODIT, FEE		المنا	DR A	DOIT, FEE		
T	he Highest Num	ber Previously Paid	For (Total or	Independer	n) is the	highest number	toun	dinth a	ppro	opriate box	in coh	ma 1.	1	